PART B - FEE(S) TRANSMITTAL

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indicated unless corrected	d below or directed other	erwise in Block 1, by (a)			and/or (b) indicating a sep		
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
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BUCHANAN, INGERSOLL & ROONEY PC POST OFFICE BOX 1404 ALEXANDRIA, VA 22313-1404				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
				(Depositor's name)			
						(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO	CONFIRMATION NO	
10/517,845	12/15/2004		Arvo Jonkka		032221-055	1312	
TITLE OF INVENTION: METHOD FOR CLAMPING A KNIFE IN A DISK CHIPPER AND A KNIFE CLAMP FOR A KNIFE ASSEMBLY							
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV PAID ISSUE	FEE TOTAL FEE(S) DU	E DATE DUE	
nonprovisional	МО	\$1510	\$300	\$0	\$1810	05/18/2009	
EXAM	INER	ART UNIT	CLASS-SUBCLASS				
MILLER, BENA B		3725	144-373000				
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. BUCHANAN INGERSOLL & ROONEY PC				
3 ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) METSO PAPER, INC. Helsinki, Finland Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government							
4a. The following fee(s) Issue Fee Apublication Fee (I) Advance Order	No small entity discount		b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form)				
5 Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in Trademark Office.							
NOTE: The Issue Fee ar interest as shown by the	records of the Office St	quired) will not be accepte ates Ratent and Trademar	ed from anyone other than k Office.	the applicant; a reg	istered attorney or agent; of	the assignee of other party in	
Authorized Signature		. Duffett J.			arch 6, 2009		
Typed or printed nan	ne Benton S.	Duffett, Jr.			No. 22,030		
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